

POS. NO.	INITIALS	ID NO.	DATE
	EMBERT		04-02-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	4251
FORMALITY REVIEW	TM	50864	5/10/01
RESPONSE FORMALITY REVIEW	HC	712	0713-01

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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